

FORM 1295

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

Certificate Number:
2016-103975

Date Filed:
08/24/2016

Date Acknowledged:

RTI/Community Management Associates "CMA"
grapevine, TX United States

Public Improvement District #12 Chapel Hill

123456

4	Name of Interested Party
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City, State, Country (place of business)

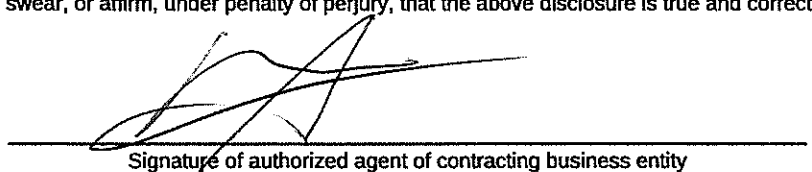
**Nature of interest
(check applicable)**

Controlling	Intermediary
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5 Check only if there is NO Interested Party.



I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Markus Ashley, this the 24th day of August, 2016, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath